

induces a kind of compassion fatigue in which photographs of warfare, famine, genocide and other forms of suffering cease to have any effect on viewers. Departing from her previous claims in *On Photography* (1977), she argues that some photographs maintain their iconic power through repeated viewing, and that it is not “overexposure” that is the source of indifference. Rather, Sontag suggests, we become indifferent toward photographs and the events they record when we conclude that these images have little to do with us and there is nothing we can do.

Regarding the Pain of Others provides a powerful meditation on the crucial role of photography in generating bonds between individuals in relative safety and comfort and humans confronting starva-

tion, mass executions or forced expulsion. These bonds are never guaranteed by the images alone. Photographs require interpretation, and different viewers put particular photographs to distinct uses. Nonetheless, without the work of photojournalists, without the labours of individuals willing to enter danger zones to witness and record what is occurring, the ties between the relatively safe and the profoundly vulnerable would be even more tenuous and fragile than they already are. The human rights activist, the physician leaving the safety of the local community hospital for the field clinics of Médecins Sans Frontières, the international relief worker, the soldier assigned to help broker peace between opposing factions, the photojournalist working in Bosnia or Afghanistan help

link those of us in settings of relative safety and comfort to regions of unrelenting poverty, hunger and violence. They remind us of the many episodes of human suffering that are not “accidents” or “acts of nature” but products of deliberate human action. They challenge us to do something, to think, and to stop pretending that the tribulations of others are wholly removed from our own lives.

Leigh Turner

Assistant Professor
Department of Social Studies of Medicine
McGill University
Montréal, Que., and
2003/04 Member
School of Social Science
Institute for Advanced Study
Princeton, NJ

Lifeworks

Waking nights

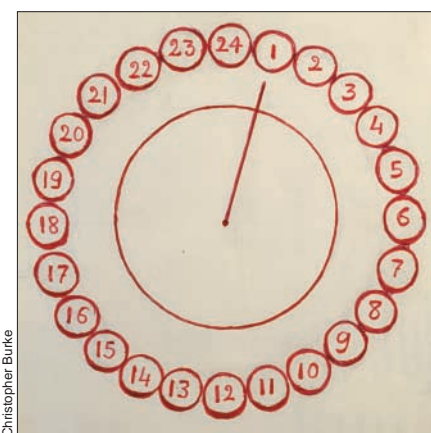
There is a longing for resolution in insomnia. A desire to find the key that will unlock the door to sleep; to end the staring, the turning, the pacing; to slow the recurring thoughts that spin with building momentum. This quest for relief is evident in *The Insomnia Drawings* of Louise Bourgeois.

Bourgeois considers her 220 *Insomnia Drawings* to be a single work. They were made in the nighttime hours during a particularly severe bout of insomnia that lasted from November 1994 to June 1995. Like much of her work, these drawings are conjured from childhood memories, which resurface here in the form of abstract images infused with an underlying sense of anxiety. Produced during a time of undesired consciousness, they represent a way to resolve and conquer sleeplessness.

Born in Paris in 1911, Bourgeois emigrated to the United States in the 1930s. She is best known as a sculptor, but her works have never been limited by one particular medium, as they incorporate anything from wood to glass, string to rubber. Rendered in ink, gouache, pencil

and crayon, *The Insomnia Drawings* are similarly diverse. But it is the invocations of the past that join this work with her others. Memories find their way into these drawings through recurrent motifs of water, music and plant life. The images that appear from the abstracted designs seem to move, like the objects they suggest, in flowing, undulating and waving patterns. Many of the lines in the drawings form spirals that appear to drift away from or toward the viewer. The effect is like staring at a hypnotist's wheel, a device to lure subjects into a trance or to invoke long-forgotten memories. There are circular forms that interconnect, overlapping in patterns that flash like the spots of light one sees with closed eyes after staring into the light — or like unwanted, lingering memories. There are lines that seem to hang from the top of the page and blow in the breeze, like swinging laundry, or like the gentle rocking that sends a baby into sleep. There are lines that close on one another to form the deep hallways we run through in nightmares; and there are lines that spiral downward into bottom-

less pits, creating a sense of endless vertigo. Interspersed among the images are fragments of text that are sometimes random and sometimes organized into sentences or poems. These reinforce the idea of art as a personal journal or diary,



Louise Bourgeois (1994–1995). From *The Insomnia Drawings*, 220 mixed-media works on paper of varying dimensions. Detail shown here: ink, charcoal and pencil on paper, 29.6 cm × 22.8 cm. Daros Collection, courtesy Cheim & Read, New York

Christopher Burke

Christopher Burke



Louise Bourgeois (1994–1995). From *The Insomnia Drawings*, 220 mixed-media works on paper of varying dimensions. Detail shown here: crayon, pencil and charcoal on paper, 22.7cm × 30.5 cm. Daros Collection, courtesy Cheim & Read, New York

a mechanism to rid the tired mind of circling demons. Three of the pictures are of clocks whose numbers join together in a circle and register the progression of time moving relentlessly forward with its mocking, tick-tocking march.

These pictures are filled with the anxiety of recurring thoughts and reveal the distress of irresolvable emotion. The repeated patterns of spirals and waves seem to be trying to lure obsessive ideas into peace through a process of self-hypnosis, but these drawings are not calming. Anxiety and the desperate desire to resolve this anxiety seem to chase one another around in circles, hoping for eventual fatigue. The images are filled with agitation. They grasp for peace. They go beyond the quest for sleep, and search for a deeper sensation of psychological well-being.

Jonah Samson

Family Medicine Resident
St. Michael's Hospital
Toronto, Ont.

The Insomnia Drawings were on display at the the Whitney Museum of American Art in New York City from June 14 to Sept. 21, 2003.

Past progressive

James R. Menzies: healing and preaching in early 20th-century China

The image of physician as evangelist predominates early literature on Canadian missionary medicine in China. When James R. Menzies graduated in Toronto on 1895, his dual degrees in theology and medicine made him an ideal missionary candidate. The Presbyterian Church in Canada dispatched the reverend doctor to China to begin the first medical mission at Changte in Honan province (Anyang, Henan). In those years the practice of medicine by missionaries was considered an evangelistic strategy aimed at gaining the trust of prospective converts; the medical doctor was welcomed where the preacher and teacher were barely tolerated.¹ Canadian Methodist physicians in Szechwan (Sichuan) were reportedly winning their way to the hearts to the people, finding opportunities “multiplying” upon them “every day and hour, for preaching the Gospel in the most effective way.”² Two of the

earliest Honanese to embrace Christianity were Chou Lao-Chang and Li Chi Ching, blind patients cared for by Canadian doctors Frazer Smith and James Menzies.^{3–5} Such legendary conversions solidified support for medical missionaries within the Presbyterian community, and may explain the subsequent official emphasis on doctors’ evangelistic role with their patients. This role was sometimes exaggerated, as a comparison between the published and unpublished versions of a photograph of Menzies will illustrate.

In 1913 the Presbyterian Board of Foreign Missions published a photo featuring Menzies standing and reading before a small Chinese audience.⁶ Its title, “Preaching to patients,” contrasts with the caption of the original photo, which reads, “Dr. Menzies with his workmen at morning prayers.” There is a subtle but significant difference between the notion of patients receiving Biblical in-

struction from a physician before receiving care, and employees participating in morning prayers. Illness and injury make patients particularly vulnerable to exploitation, and it is possible that they could interpret conversion to Christianity as the price of receiving treatment, or interpret Christian rituals as magical cures. The discrepancy between the photographs suggests that evangelism by physicians may have been more rhetoric than reality. Whether or not it was common, mission supporters expected and idealized the practice of preaching to patients. For his part, Menzies believed that, while practical skills might improve lives, the Christian message could *transform* them. He lived by his Christian convictions.

Arguably, he also died by them. On Mar. 17, 1920, Menzies was murdered while coming to the aid of Sadie Lethbridge and Janet Brydon, two missionaries whose home had been stormed by